

## APPLICATION FOR STUDY BURSARY - 2018

### Instructions to applicants

- Closing date for bursary application: **30 September 2017**
- Please complete the application form in black ink.
- Write in the blocks only, one letter per block. Always start in the first block.
- Where choices have to be made, mark the appropriate block with an X.
- Only applications submitted on the prescribed application form will be considered. No tippex must be used on the application form and **no faxed/e-mailed application forms will be accepted.**
- Incomplete or late applications **will not** be considered.
- Forward application to:

Head: Student Affairs

Elsenburg Agricultural Training Institute

PO Box 54

ELSENBURG

7607

SECTION A: PERSONAL DETAILS OF APPLICANT												
1. Identity no.												
2. Date of birth												
3. Surname												
4. Race <b>(For Employment Equity/Skills Development)</b>	Black	Coloured	Indian	White								
5. First names												
6. Title, <b>Mr/Ms/Mrs</b>												
7. Language	Afrikaans		Sesotho sa Leboa									
	English		Setswana									
	IsiNdebele		SiSwati									
	IsiXhosa		Tshivenda									
	IsiZulu		Xitsonga									
	Sesotho											
	Other (Specify)											





If you are currently a registered student at the Institute, declare the following:			
(a) Student number			
(b) Programme	<input type="checkbox"/> B.Agric	<input type="checkbox"/> Higher Certificate	<input type="checkbox"/> Equine Studies
(c) Current year of study e.g. 1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup>		(d) Minimum remaining period of course	
(e) Expected date of completion			
(f) Have you failed any modules? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, specify which module/s</b>			

SECTION D: FINANCIAL DETAILS				
14. Details of	Initials	Surname	Occupation	Gross income per month
<i>Father</i>				
<i>Mother</i>				
<i>Guardian</i>				
<i>Applicant</i>				
<i>Spouse</i>				
15. Marital status of Provider	Unmarried	Married	Widower/ Widow	Divorce
16. Applicant: Are you temporarily employed?  <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes: Name and Tel nr of employer:		Monthly income:	
17. Are/were you in receipt of another bursary/loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, Name of institution				
Nature of obligations				
Fulfilment of obligations	<input type="checkbox"/> Completed <input type="checkbox"/> Not completed			

**SECTION E: DOCUMENTATION**

**Please attach certified copies of the following:**

- Identity documents of applicant and parents/guardian
- Certificates of qualifications
- Academic records/Grade 12 results
- Source of income of applicant and parents/guardian
  - Three months' payslips/Proof of grant income from SASSA /A sworn statement if unemployed
- Three months' bank statements of applicant and parents/guardian
- Death Certificates (if applicable)

**Please note:** If the above- mentioned documents are not attached and/or the application form is not signed, your application will not be considered. All documentation provided will be treated with strict confidentiality.

**SECTION F: DECLARATION**

I/WE HEREBY CONSENT TO THE PROCESSING OF THE PERSONAL INFORMATION AND SPECIAL PERSONAL INFORMATION IN THE CASE OF A MINOR PROVIDED IN THIS DOCUMENT FOR THE PURPOSES OF AN APPLICATION FOR A BURSARY FROM THE WESTERN CAPE GOVERNMENT'S ELSENBURG AGRICULTURAL TRAINING INSTITUTE.

I DECLARE THAT THE ABOVE INFORMATION TO MY KNOWLEDGE IS TRUE AND CORRECT AND ACCEPT THAT IF IT WERE TO BE FOUND THAT I WITHHELD ANY INFORMATION; MY APPLICATION WILL BE CANCELLED IMMEDIATELY.

SIGNATURE OF APPLICANT ..... DATE .....

**IN CASE OF A MINOR**

SIGNATURE OF PARENT/GUARDIAN

DATE .....